



Office of the County Clerk

Diana Alba
County Clerk

Commissioner of Civil Marriages

Marriage Services Division

201 East Clark Avenue

P. O. Box 551603

Las Vegas, NV 89155-1603

Jim Pierce

Assistant County Clerk

**PLEASE NOTE: IT IS UNLAWFUL TO SOLEMNIZE MARRIAGES
BEFORE YOU OBTAIN A CERTIFICATE**

INSTRUCTIONS FOR A RETIRED STATUS CERTIFICATE OF AUTHORITY

The following documents are required to apply for a *Retired Status Certificate of Authority to Solemnize Marriages in the State of Nevada*:

1. *Application for a Retired Status Certificate of Authority to Solemnize Marriages in the State of Nevada*
2. *Affidavit for Retired Status (must be signed by someone in the church or religious organization who has authority to speak on behalf of the church or religious organization and can verify that you had active charge of the church or religious organization for at least 3 years of continuous service. This cannot be signed by the applicant.) If the church or religious organization has since been dissolved or is no longer in existence, a notarized statement from an individual who can verify the applicant's service to the church or religious organization may be accepted.*
3. *Release and Authorization for Background Investigation, including the Payment Information/Authorization For Background Check. (Payment in the amount of \$45.00 for the background check may be by money order or cashier's check (payable to Screening One), credit card, or checking account transfer by providing a voided check.) Payment must be returned with all other documents listed in items 1, 2 and 3.) **This fee is non-refundable.***

Please Note: All paperwork should be returned to this office at the address listed above, Attention: Minister Licensing. (Do NOT return the instruction sheet.) Item No. 3, together with payment of \$45.00, will be forwarded to Screening One for the background check. The background check will be completed within approximately 7 business days and the report will be forwarded to the Clark County Clerk. Upon receipt of the background check report, the County Clerk will review all documents. If everything is in order, the *Certificate of Authority to Solemnize Marriages* should be completed within 5 – 7 business days after receipt of a favorable background check report. Note that applicants who already hold an active/valid certificate and have already passed a background check upon their initial application are not required to complete Item No. 3 above.

If approved, the certificate will be mailed to **the residence address listed on the application**, along with an *Information Sheet for Officiant* which provides information on completing the marriage certificate. If you would like to arrange to pick up the certificate or to have it mailed to another address, please include the instructions with the application paperwork. The certificate cannot be sent via express mail unless a self-addressed, pre-paid express mail envelope is enclosed.

If the application is not approved, you will receive a letter or an e-mail explaining why it was not granted. Normal processing time for applications **after receipt of background check report** is 5 -7 business days. Paperwork must be filled out completely and properly signed and notarized. **PLEASE ALLOW SUFFICIENT TIME FOR PROCESSING IF YOU ARE TO SOLEMNIZE A WEDDING IN THE NEAR FUTURE (sending paperwork 6 to 8 weeks in advance is recommended). DO NOT LEAVE BLANK SPACES.** Paperwork must be filled out completely and properly signed and notarized. **PAPERWORK THAT IS INCOMPLETE OR INCORRECT WILL DELAY THE PROCESS AND/OR MAY RESULT IN THE CERTIFICATE BEING DENIED.**

Ex-Officio Clerk of:

OCT 2011 Rev.

Board of County Commissioners – Clark County Board of Equalization

Clark County Liquor and Gaming Board – Mt. Charleston Fire Protection District

Clark County Water Reclamation District Board of Trustees – Clark County Debt Management Commission

Big Bend Water District Board of Trustees – Clark County Redevelopment Agency

University Medical Center of Southern Nevada Board of Trustees

County of Clark, State of Nevada

APPLICATION FOR RETIRED STATUS CERTIFICATE OF AUTHORITY TO SOLEMNIZE MARRIAGES IN THE STATE OF NEVADA

1. _____
Full Name of Applicant Nickname or Aliases Used
2. _____
Residence Physical Address City State Zip Code
3. _____
Mailing Address, if Different City State Zip Code
4. _____
Date of Birth Social Security Number E-mail Address
5. Telephone Nos. _____
Residence Church or Organization No. Cell Phone
6. Date of licensure, ordination, appointment or authorization by church or religious organization: _____
7. Do you currently have a valid certificate from Clark County? ☐ Yes ☐ No
8. Name & address of the **church or religious organization** of which you have had active charge for at least three years of continuous service:
- _____
Name
- _____
Physical Address City State Zip Code
- _____
Mailing Address, if Different City State Zip Code
9. Dates you had active charge of the church or religious organization listed above _____
10. Are you still affiliated with this organization? ☐ Yes ☐ No
11. If you **currently** serve or have an affiliation with a local religious organization **different than # 8 above**, please provide the name and address below:
- _____
Name
- _____
Physical Address City State Zip Code
12. Have you been convicted of a felony, been released from confinement or completed parole or probation, whichever occurs later, within the last 10 years? ☐ Yes ☐ No
13. If yes, specify the date and place of conviction and what the charges were. **(A copy of the disposition of the case must be provided)**
- _____

11. Have you ever had a previous Certificate to perform/solemnize marriages removed, revoked or suspended?
☐ Yes ☐ No
- If yes, when, where and what were the grounds? _____

12. Please mark the appropriate response (failure to **mark one of the three** will result in a delay in processing or possible denial of the Application.)

_____ I am not subject to a court order for the support of a child;

_____ I am subject to a court order for the support of one or more children and I am in compliance with the order or I am in compliance with a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order; or

_____ I am subject to a court order for the support of one or more children and I am NOT in compliance with the order or a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

I certify by my signature below that my active ministry was (or is) one of service to my church or religious organization.

Signature of Applicant

Note that all application paperwork must be submitted and completed within six months or it will be necessary to reapply.

Applicants will not be allowed to resubmit application paperwork for six months if the application is denied.

VERIFICATION

STATE OF _____)
COUNTY OF _____) ss:

_____, being first duly sworn according to law, deposes and says:
(Name of Applicant)

That he or she is the Applicant in the foregoing ***Application for a Retired Status Certificate of Authority to Solemnize Marriages in the State of Nevada***; that he or she has read the foregoing Application and knows the contents thereof; that the same are true of his or her own knowledge, except for such matters therein stated on information and belief, and as to those matters he or she believes them to be true.

Signature of Applicant

SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME

this _____ day of _____, 20____.

NOTARY PUBLIC

<p style="text-align: center;">NOTE: IT IS UNLAWFUL TO PERFORM MARRIAGES PRIOR TO THE ISSUANCE OF A CERTIFICATE OF AUTHORITY TO SOLEMNIZE MARRIAGES</p>

AFFIDAVIT FOR RETIRED STATUS

STATE OF _____)
)ss.
COUNTY OF _____)

The _____
(church or religious organization)

is/was organized and carries/carried on its work in the State of _____. Its active meetings are/were conducted at

(street address, city or town)

The said church or religious organization hereby finds that

(name of minister or other person authorized to solemnize marriages)

had active charge of the above church or religious organization from _____ to _____.

I am duly authorized by _____
(church or religious organization)
to complete and submit this affidavit.

Signature of Official

Name of Official (type or print name)

Title of Official

Address

City, State and Zip Code

Telephone Number

SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME

this ____ day of _____, 20____.

NOTARY PUBLIC

**OFFICE OF THE CLARK COUNTY CLERK
DIANA ALBA**

RELEASE AND AUTHORIZATION FOR BACKGROUND INVESTIGATION

In connection with my application for Authorization to Solemnize Marriages in the State of Nevada pursuant to NRS 122.064, subsection 3 (c), I hereby authorize Diana Alba, Clark County Clerk, and Screening One, Inc. to perform a background screening check (including future screenings for retention, if applicable, and unless revoked by Applicant in writing). I understand and agree to the following:

1. A background check is not only for the benefit of the Clark County Clerk as a sound business practice, but also for the benefit of the public. It is no reflection on an applicant. The report consists of information deemed to have a bearing on the decision to grant authorization to solemnize marriages in the State of Nevada, and may include information from public and private sources and public records. The scope of the report may include information concerning civil and criminal court records, identity, past addresses and social security number and is conducted in accordance with applicable federal and state laws.
2. All reports are confidential and provided to the Clark County Clerk for decisions concerning authorization to solemnize marriages only.
3. I may review or obtain a copy of my report as provided by law. Screening One may be contacted by writing to: Screening One, Inc., 2233 W. 190th Street, Torrance, CA 90504.
4. I authorize and release people, companies, municipal, county, state and federal agencies and courts to provide all information that is requested to the Clark County Clerk or Screening One.
5. I further release all of the above, including the Clark County Clerk and Screening One, to the full extent permitted by law, from any liability or claims arising from retrieving and reporting information concerning me.
6. I agree that a copy or fax of this document shall be as valid as the original.

I, _____ ,
(Print name legibly)

hereby consent and authorize the Clark County Clerk and/or Screening One, Inc., on the Clark County Clerk's behalf, to prepare each report as defined above to assist in making decisions relating to granting authorization to solemnize marriages in the State of Nevada, before such decision to grant authorization or anytime after such authorization.

Signature _____ Date _____

Last Name		First Name	Middle Name	Social Security Number
DOB ¹ : ____/____/____ Mo Day Year		Former Names	Date of Name Change	
Name on Driver's License		Driver's License or I.D. Number	State of Issue	

[illegible]

screening**ONE**



Questions? Contact Us at:
Ph: 888.327.6511 ext. 206
Fx: 888.216.1003

Payment Information/Authorization
For Background Check

Please type or clearly print all information

Select Payment Method:

- ☐ Cashier's Check in the amount of \$45.00 payable to screeningONE, Inc.
- ☐ Money Order in the amount of \$45.00 payable to screeningONE, Inc.
- ☐ Credit Card Authorization

Type of Card: _____ (Example: Visa, Mastercard, Amex)

Name on Card: _____

Credit Card Number: _____

Expiration Date (Month/Year): _____ Security Code: _____

Billing Address on card: _____

- ☐ Checking Account ACH (please provide a voided check)

Bank Name: _____

Account Number: _____

Routing Number: _____

Name of Bank Account: _____

Signed: _____ Date: _____